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STATEMENT OF

FORM 1		ORGANIZATION			Office Use Only
NAME OF COMMITTEE (in full)		(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Prudential Fin	ancial I	nc. Federal Politica	al Action Committe	e (AKA - Pru	dential Federal PAC)
ADDRESS (number and street)		751 Broad Street			
(Check if address is changed)		14th Floor			
		Newark		NJ	07102-3777
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES (Check if address is changed)		SS (Please provide only one jill.l.johnson@prudential.c			
COMMITTEE'S WEB	PAGE ADE	DRESS (URL)			
_					1
(Check if is change					
2. DATE 02	M / D 09	2012			
3. FEC IDENTIFIC	CATION NU	имвек С С	C00127779		
4. IS THIS STATE!	MENT	NEW (N) OR	× AMENDED (A	A)	
I certify that I have e	examined th	is Statement and to the bes	st of my knowledge and bel	lief it is true, correc	t and complete.
Type or Print Name	of Treasurer	Mr. Roman Gabriel			
Signature of Treasure	Mr. Ron er	nan Gabriel	[Electronically File	d] Date 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of		·	n may subject the person sign		the penalties of 2 U.S.C. §437g.
Office Use Only			For further informat Federal Election Com Toll Free 800-424-95: Local 202-694-1100	nmission	FEC FORM 1 (Revised 02/2009)